



COMMONWEALTH of VIRGINIA

DEPARTMENT OF SOCIAL SERVICES

June 26, 2006

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROGRAM

TANF Transmittal 33

This transmittal reflects changes related to the handling of support paid to the Division of Child Support Enforcement (DCSE) for suspended TANF cases and the treatment of support paid to TANF recipients in the month of suspension *after* the case has been reinstated. The changes in this transmittal are effective July 1, 2006.

Transmittal changes and guidance for updating the policy manual are listed below. This transmittal is available on the intranet at

<http://www.localagency.dss.state.va.us/divisions/bp/tanf/manual.cgi> and on the internet at http://www.dss.virginia.gov/benefit/tanf_manual.html.

Suspended TANF Cases and DCSE – The treatment of support paid to the Division of Child Support Enforcement (DCSE) for months a TANF case is in suspension has changed. Current total support paid to DCSE on behalf of a child in a TANF case will be treated the same as support paid to DCSE on a closed TANF case.

When a TANF case is suspended, DCSE will send to the TANF recipient all current support paid to DCSE for the suspended month. Current support includes the \$50 disregard. Because the support is mailed to the assistance unit, should the case be reinstated the assistance unit will not receive a TMP in the corresponding month three (for example, support mailed to the recipient in July will not result in a TMP for September).

Disregarded Income – TANF cases that have been reinstated after a suspension may be eligible for a supplemental TANF check. The check can be issued after a benefit calculation in ADAPT has been completed. The calculation in ADAPT must include the net support mailed to the client in the suspended month, verified through APECS. Support mailed to the client from DCSE in the month of suspension *after* the payment has been calculated must be disregarded.

The pages of this transmittal are to be incorporated in the TANF Manual as follows:

Section 305.4, pages 24b – 25, dated 7/06 (2 sheets) to replace Section 305.4, pages 24b – 25, dated 4/05 and 7/05, respectively (2 sheets).

Table of Contents, Chapter 600, page 1, dated 7/06 (1 sheet) to replace Table of Contents, Chapter 600, page 1, dated 4/06 (1 sheet).

Section 602.5, pages 4 – 6b, dated 7/06 (5 sheets) to replace Section 602.5, page 4-6, dated 7/04 (3 sheets).

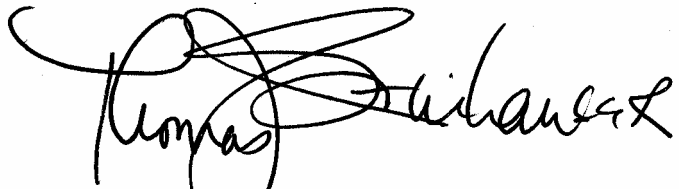
Index, page 14, dated 7/06 (1 sheet) to replace Index, page 14, dated 12/03 (1 sheet).

Runover Page

Section 305.4, page 25

Forms

Advance Notice of Proposed Action 032-03-0018-29-eng (7/06) – the online version of this form is being updated at this time.

A handwritten signature in black ink, appearing to read "Thomas Steinhauser", with a large, stylized flourish at the end.

Thomas Steinhauser
Acting Director
Division of Benefit Programs

MAIN TABLE OF CONTENTS

| | |
|--|----------|
| Notification, Recoupment and Recovery of Overpayments | 503.8 |
| Recoupment | 503.8 A. |
| Recovery | 503.8 B. |
| Responsibility for Overpayments | 503.8 C. |
| Prompt Correction of Overpayments | 503.8 D. |
| Determining Intentional Program Violation (IPV) | 503.8 E. |
| Reporting Overpayments | 503.8 F. |
| Correction of Prior Underpayments | 503.9 |
| Offsetting Overpayments and Underpayments | 503.10 |
| Appendix I - Check Handling Information and Procedures | |

Chapter 600 - Support from Legally Responsible Persons

| | |
|---|-----------------|
| Support Enforcement Program | 601.1 |
| Legal Base | 601.1 A. |
| DCSE Responsibilities | 601.1 B. |
| Local Agency Responsibilities | 601.1 C. |
| Referral of Case Information to Division of Child Support Enforcement | 601.2 |
| Referral of TANF Case | 601.2 A. |
| TANF-UP Cases | 601.2 B. |
| Changes to TANF and TANF-UP Cases | 601.2 C. |
| Contact with the Absent Parent | 601.2 D. |
| Automated Communication with DCSE | 601.2 E. |
| Legally Responsible Persons | 601.3 |
| Husband | 601.3 A. |
| Wife | 601.3 B. |
| Parent, Natural or Adoptive | 601.3 C. |
| Stepparent | 601.3 D. |
| Out-of-Wedlock Father | 601.3 E. |
| Redirection of Support Monies from Non-Custodial Parent | 602.1 |
| Treatment of Support | 602.2 |
| Support from Non-Custodial Parents Absent from the Home | 602.3 |
| Support from Responsible Persons in the Home | 602.4 |
| Minor Caretaker/Remarried Caretaker | 602.4 A. |
| Stepparent | 602.4 B. |
| Handling of Support Payments Collected by the State | 602.5 |
| Notification Report | 602.5 A. |
| Handling of Support on Suspended TANF Cases | 602.5 B. |

Appendix I - Information to be Given to Applicant/Recipient
Appendix III - Child Support Enforcement District Offices and
the Localities Within Districts
www.dss.virginia.gov/family/dcseoffices.cgi, or
<http://localagency.dss.virginia.gov/divisions/dcse/contacts.cgi>

Chapter 700- TANF- (UP) Unemployed Parent Program

| | |
|--|-------|
| Purpose of the TANF-UP Program | 701.1 |
| Categorical Requirements and Conditions of Eligibility Applicable to the TANF-UP Program | 701.2 |
| Assistance Unit TANF-UP | 701.3 |
| Financial Criteria | 701.4 |

32. All bona fide loans, regardless of the intended use.* This includes loans obtained for any purpose, and may be from a private individual as well as from a commercial institution. A simple statement signed by both parties indicating that the payment is a loan and must be repaid is sufficient to verify that a loan is bona fide. If the customer indicates that money received was a loan but does not provide required verification, the money is to be treated as unearned income in the month received. Interest earned on the proceeds of a loan while held in a savings account, checking account, or other financial instrument will be counted as unearned income in the month received.
33. Income, including support, received by or on behalf of a child ineligible for TANF due to the family cap provision.**
34. Payments received by victims of Nazi persecution under Public Law 103-286.
35. Matching contributions deposited in an individual development account (IDA) or on the applicant/recipient's behalf in a parallel account maintained by the organization administering the IDA program.
36. Income received by children who are in a VIEW period of ineligibility.
37. Interest income of less than an average of \$10 per month.
38. TANF Match Payments issued to TANF recipients based on current support collected by the Division of Child Support Enforcement.
39. Any veteran benefits received by children born with spinal bifida, who are natural children of individuals who served in Vietnam during the period beginning January 9, 1962, and ending on May 7, 1975.
40. Payments received from the Ricky Ray Hemophilia Relief Fund established under Public Law 105-369.
41. Allowances, earnings, and payments to individuals participating in programs under Title I of the Workforce Investment Act (WIA).***
42. Any amount received by or made available to household members for deployment or service in a combat zone will not count as income for TANF purposes unless the payment was received before the deployment. This exclusion includes items such as, but not limited to, incentive pay for hazardous duty, special pay for imminent duty or hostile fire duty or certain reenlistment bonuses, or special pay for certain occupational or educational skills.
43. **Support sent to clients from DCSE in a month the TANF case is reinstated and a supplemental check issued. The disregard applies only to the month the case was reinstated.**

* 45 CFR 233.20(a)(3)(xxi)
** Code of Virginia, Section 63.2-604
*** 20 CFR 667.272 (c)

B. Income From Social Security and Other Benefits - Monthly benefits received or anticipated to be received by members of the assistance unit, or individuals required to be in the assistance unit, must be counted as income, with the following exceptions:

1. When a member of the assistance unit is eligible for benefits (such as but not limited to, RR Retirement, private corporation retirement, Veterans, Social Security, or any reduced benefits), the verified amount must be counted, even though the individual chooses not to accept such benefits.

The agency has a responsibility to explore potential resources and assist the applicant/recipient in developing them to a state of availability whenever possible.*

2. When educational benefits are being received from Veterans Administration. (See 305.4.A.12.)
3. When the Medicare Part B premium is deducted from the Social Security or Railroad Retirement benefits of an individual who is also receiving Medicaid. The amount of benefits actually received, plus the amount of the Part B premium, is counted as income since Medicaid will pay the premium during the time the individual receives Medicaid.

C. Lump Sum Payments - The receipt of a nonrecurring lump sum payment, such as the accumulation of benefits for a prior period, including Social Security and Workmen's Compensation benefits; payments in the nature of a windfall, e.g., inheritances or lottery winnings; personal injury awards; life insurance settlement when the policy is owned by someone other than a member of the assistance unit; or income from any other nonrecurring source, except lump sums for casualty property loss, shall be counted as income in the month of receipt. This evaluation of lump sums also includes those received by the parent(s) of a minor caretaker or a stepparent who is not included in the assistance unit.

In situations involving casualty property loss payments for repair or replacement of damaged/lost property, such payments will not be considered as countable income even in the month of receipt as the payment is designed to allow for the replacement of damaged/lost property.

1. Determining amount of lump sum to be considered - Only the amount received by an individual which is available for maintenance (lump sum, less directly related expenses paid) shall be considered as income.

2. Allowable expenses include, but are not limited to:

Payment of debts which are incurred for a member of the assistance unit, such as:

medical bills incurred from the period prior to receipt of the lump sum,

expenses related to a natural disaster or fire,

costs related to avoiding the assistance unit's eviction and/or a utility cutoff,

weather related repairs or replacement to the home in which the assistance unit lives, and

funeral expenses.

TABLE OF CONTENTS

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) POLICY MANUAL

Chapter 600 - Support from Legally Responsible Persons

| | |
|---|-----------------|
| Support Enforcement Program | 601.1 |
| Legal Base | 601.1 A. |
| DCSE Responsibilities | 601.1 B. |
| Local Agency Responsibilities | 601.1 C. |
| Referral of Case Information to Division of Child Support Enforcement | 601.2 |
| Referral of TANF Case | 601.2 A. |
| TANF-UP Cases | 601.2 B. |
| Changes to TANF and TANF-UP Cases | 601.2 C. |
| Contact with the Absent Parent | 601.2 D. |
| Automated Communication with DCSE | 601.2 E. |
| Legally Responsible Persons | 601.3 |
| Husband | 601.3 A. |
| Wife | 601.3 B. |
| Parent, Natural or Adoptive | 601.3 C. |
| Stepparent | 601.3 D. |
| Out-of-Wedlock Father | 601.3 E. |
| Redirection of Support Monies from Non-Custodial Parent | 602.1 |
| Treatment of Support | 602.2 |
| Support from Non-Custodial Parents Absent from the Home | 602.3 |
| Support from Responsible Persons in the Home | 602.4 |
| Minor Caretaker/Remarried Caretaker | 602.4 A. |
| Stepparent | 602.4 B. |
| Handling of Support Payments Collected by the State | 602.5 |
| Notification Report | 602.5 A. |
| Handling of Support on Suspended TANF Cases | 602.5 B. |
| Appendix I - Information to be Given to Applicant/Recipient | |
| Appendix III - Child Support Enforcement District Offices and the Localities Within Districts | |
| www.dss.virginia.gov/family/dcseoffices.cgi or | |
| http://localagency.dss.virginia.gov/divisions/dcse/contacts.cgi | |

602.5 HANDLING OF SUPPORT PAYMENTS COLLECTED BY THE STATE

State and federal regulations require that all support paid for or on behalf of a child or caretaker receiving TANF must be directed to the State as a refund toward public assistance paid on behalf of such children or caretaker.*

Federal regulations require the Support Enforcement agency to notify the agency administering the TANF program, of the amount of support collected which represents payment on the required support obligation for each month. The notification requirements are accomplished through the report, TANF Cases, Current Collected Support and Expected TMPs displayed monthly and accessed by local agencies on the VDSS Local Agency Intranet Page. This report shows support collected on the required support obligation by the State in the prior month and is available on line by the 15th of the month following the month in which the support was collected. The local agency administering the TANF program is required, upon being informed of this amount, to determine if such payment is sufficient to make the family ineligible for an assistance payment.**

Under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 states were given the option to continue the \$50 disregard payments to TANF recipients, where appropriate. Virginia opted to continue the \$50 disregard payments. No disregard payment, shall be made, however, for a month in which there is no support collected.** When support is collected from two or more absent parents, only the first \$50 of the total support collected will be paid to the assistance unit and disregarded. The disregard will be issued to TANF recipients when the TANF case has a status of 'GR' (granted) or 'GV' (granted VIEW).

TANF cases with a 'SU' (suspended) status for any reason, will be sent from DCSE the current total (includes \$50 disregard) collected support for the actual month of suspension.

A. Notification to Local Agencies

The report, TANF Cases, Current Collected Support and Expected TMPs displays current support payments paid to DCSE on the required support obligation from non-custodial parents for the month identified on the report. The monthly TANF benefit and the amount of the TANF Match Payment (total current monthly support, minus the disregard) will also display on the report, TANF Cases, Current Collected Support and Expected TMPs.

This report must be accessed and reviewed monthly. The amount of support shown on the report should be used as outlined below:

* 45 CFR 302.32(a) and Section 63.2-1909, Code of Virginia

** 45 CFR 233.20

1. Compare the net support to the current monthly TANF amount.
2. If the net support does not exceed the monthly TANF amount no further action is needed on the TANF case.
3. If the net support is greater than the current monthly TANF amount **ADAPT will suspend the payment.**
4. When the net support is greater than the current monthly TANF amount for two consecutive months, **ADAPT will close the TANF case.**
5. **When the report shows an 'R' in the 'Net Support' column, the worker must run ED/BC and grant the case before cutoff of the report month.**

Redirected support paid to DCSE will not be screened at either 185% or the standard of assistance.

Payments made to DCSE in a month which exceeds the grant amount will be marked by one or two asterisks. The number of asterisks denotes how many months net child support exceeded the monthly TANF grant amount. Two asterisks will display when net support exceeds the TANF benefit for two consecutive months. **ADAPT will automatically suspend** cases marked with one asterisk.

ADAPT will automatically close TANF cases marked with two asterisks. When net support has exceeded the TANF benefit for two consecutive months, ADAPT will close the case in the month that the two asterisks appear on the *TANF Cases, Current Collected Support, and Expected TMPs* report. The closure will take place during the TMP process in ADAPT. Notices will be generated and mailed along with the regular TMP notices.

Support Enforcement will then, on all cases in which eligibility no longer exists, take action to redirect the support to the family in lieu of the public assistance payment.

Note: The report, TANF Cases, Current Collected Support and Expected TMPs and inquiry into the Automated Program to Enforce Child Support (APECS) through the Multiple System Inquiry (MSI) are the only acceptable means of verifying support amounts that have been redirected to and are collected by the Division of Child Support Enforcement. One of these sources must be used in determining continuing eligibility for public assistance.

Support reported by a client is to be verified at the time it is reported if it has not yet been re-directed to DCSE. Timely action is to be taken to close the case if the support causes ineligibility.

The only exception to using the TANF Cases, Current Collected Support and Expected TMPs report or APECS inquiry is direct communication with the district DCSE representative. The DCSE representative should only be contacted when the recipient disagrees with the listed amount. The case record must be documented with the date, amount, and name of the

DCSE representative. However, the time frame for taking action remains the same. If the case is determined to be ineligible, the case must be suspended before cutoff of the month in which the TANF Cases, Current Collected Support and Expected TMPs report was received by the agency.

B. Handling of Support on Suspended TANF Cases

Suspended cases will have mailed to them from DCSE the current total (includes \$50 disregard) collected support for the actual month of suspension.

Process

- TANF case is suspended in ADAPT in a current month, effective the 1st of the next month.
- ADAPT sends to DCSE the suspension status at the end of the month in which the suspension was entered.
- DCSE changes the case status in APECS from TANF to Non-TANF at the beginning of the suspended month.
- DCSE sends the client all support collected in the actual month of suspension, within two days of receipt.

★ If current support greater than \$50 was paid to DCSE two months earlier, the client will receive a TANF Match Payment in the month of suspension.

Suspended TANF cases may be reinstated when the recipient has satisfied the requirements of the reason for suspension. Cases suspended due to net support exceeding the TANF payment amount (SU 013) must not be reinstated for the month of suspension.

When it is appropriate to reinstate the TANF case, change the status from 'SU' to 'GR' or 'GV', and ensure payment is made for the appropriate month(s).

- If reinstating for the month of suspension complete a benefit calculation for the month of suspension counting the net support (minus the first \$50) sent to the client from DCSE.
- The support for the month of suspension must be verified through APECS and the net support counted in the benefit calculation.
- Additional support payments sent from DCSE to the client in the month of suspension *after* the payment has been reinstated must not negatively impact the client.
- If the 'GR' is for the month following the month of suspension ADAPT will calculate the payment amount.

EXAMPLES:#1

TANF case is suspended effective July 1, Interim Report not returned to agency. A completed Interim Report is received July 12th. The AU has zero countable income.

Eligibility worker is reinstating the grant on July 14th
APECS shows a total of \$189 has been sent to the client.

| | | | |
|--------------|----------|------------------|----------------|
| Grant amount | \$320.00 | Mailed support | \$189.00 |
| | | Disregard amount | <u>- 50.00</u> |
| | | | \$139.00 |

Grant amount \$320 - \$139 = \$181.00 TANF supplement for July

Another payment in the amount of \$102 is made to DCSE on July 23rd and mailed to the client on July 27th. The support payment mailed to the client will not cause an overpayment.

Because support for the month of July was sent from DCSE to the TANF recipient, the TANF recipient will not receive a TANF Match Payment in September.

#2

The 'TANF Cases, Current Collected Support, and Expected TMP' report in June shows case with a 'SU 013', suspended due to excess support. The net support is \$519, the monthly TANF payment is \$320. One asterisk displays in the column 'Net Support'.

ADAPT has suspended this case effective July 1st.

ADAPT will send a 'trigger' to DCSE at the end of June.

DCSE will change this case to Non-TANF for the beginning of July.

All current support paid to DCSE from the non-custodial parent(s) in the month of July will be sent to the TANF recipient.

★ This case must not be reinstated.

Because support for the month of July was sent from DCSE to the TANF recipient, the TANF recipient will not receive a TANF Match Payment in September.

#3

The 'TANF Cases, Current Collected Support, and Expected TMP' report in June shows TANF cases with a 'SU 010', VIEW Sanction; 1st Sanction. The net support for May is \$466 with a monthly TANF payment of \$451. One asterisk displays in the column 'Net Support'.

ADAPT has suspended this case effective July 1st.

ADAPT will send a 'trigger' to DCSE at the end of June.

DCSE will change this case to Non-TANF for the beginning of July.

All current support paid to DCSE from the non-custodial parent(s) in the month of July will be sent to the TANF recipient.

★ VIEW requirements met on July 16th, TANF benefit reinstated July 19th, effective August 1st.

The worker does the following:

1. Runs ED/BC and authorizes the August payment with a 'GV'.
2. A supplemental payment is not issued for the month of July.
(The VIEW sanction must be served)

A TANF Match Payment will not be issued in September. TANF recipient received the support from DCSE for this month.

| SUBJECT | SECTION/PAGE(S) |
|--|--|
| Support Redirected to DCSE | 305.4, p. 36-36a, 37; 602.1, p. 1 602.5, p. 6-6b |
| Handling of support on suspended cases | |
| Suspension | 401.3, p. 6; 901.6, p. 6-7 |
| Summer Youth Program | 305.3, p. 15 |
| Systematic Alien Verification for Entitlements (SAVE) | 201.7, p. 1d-1g |
| Temporary Absence from Home | 201.5, B |
| Temporary Assistance for Needy Families - Unemployed Parent (TANF-UP) | 201.5, B; 701.1; 701.2; 701.3; Chapter 700; app. 3 to Ch. 900; 1000, p. 55 |
| Termination of Assistance | |
| Continuing Medicaid | 401.7, p. 13 |
| When Income Change is Reported | 305.1, p. 9a |
| Refusal/Failure to Sign Agreement Of Personal Responsibility (APR) | 901.5, C |
| Third Party Payments | 305.4, p. 36a |
| \$30 (Thirty Dollar Disregard) | 305.3, p.16-17 & 20-21; Procedures VII, p.3 |
| \$30 1/3 (Thirty and One Third Disregard) | 305.3, p.16-17 & 20-21; Procedures VII, p.3 |
| Time Standards for Processing | |
| Application | 401.1, p. 2-3 |
| Changes to AU | 401.1, p. 1; 401.2, p. 2b-2d |
| Income Changes | 305.1, p. 9-9a |
| Timely Notice | 401.4, p. 7 & 8-9a |
| Tips | Procedures VII, p. 1a |
| Transfer of Cases | 502.6, p. 5-7b; 901.12, p. 10-11; 1000, p. 66 502.6; p. 7b |
| Medicaid coverage | |
| Transitional Benefits | |
| Child Care | 401.8, p. 13; 901.3, p. 11 |
| Medicaid Extension | 901.13, p. 11 |
| Transportation | 901.10, p. 9a; 901.11, p. 9a; 1000, p.15, 67 |

ADVANCE NOTICE OF PROPOSED ACTION

ACTION TO BE TAKEN ON YOUR CASE IS EXPLAINED BELOW.

| | |
|--|---------|
| Case number | Program |
| | |
| | |
| | |
| Date of Mailing: | |
| Call 1-866-534-5243, Legal Aid Hotline for free legal assistance | |

| | | | | | | | |
|---|--|-----------------------------------|--|--|--|------------|--|
| <input type="checkbox"/> FOOD STAMPS | | | | Your food stamp allotment will be: <input type="checkbox"/> Reduced <input type="checkbox"/> Suspended <input type="checkbox"/> Terminated | | | |
| Effective Date: | | Amount of reduction: From: To: | | Eligibility Worker: | | Telephone: | |
| Reason for Proposed Action: _____ | | | | | | | |

| | | | | | | | |
|---|--|-----------------------------------|--|---|--|------------|--|
| <input type="checkbox"/> FINANCIAL ASSISTANCE | | | | Your assistance check will be : <input type="checkbox"/> Reduced <input type="checkbox"/> Suspended <input type="checkbox"/> Terminated | | | |
| Effective Date: | | Amount of Reduction: From: To: | | Eligibility Worker: | | Telephone: | |
| Manual Reference: _____ Reason for proposed action: _____ | | | | | | | |
| <input type="checkbox"/> VIEW Termination – The TANF case is closed until you reapply and are found eligible for TANF/TANF-UP <input type="checkbox"/> VIEW Sanction - your household's entire TANF or TANF-UP benefits will be suspended for the above reason. <input type="checkbox"/> 1 ST Sanction - 1 month or compliance <input type="checkbox"/> 2 ND Sanction - 3 months and compliance <input type="checkbox"/> 3 RD Sanction - 6 months and compliance YOU HAVE 10 DAYS AFTER THE DATE OF THIS NOTICE TO CONTACT YOUR VIEW WORKER TO SHOW DOCUMENTED GOOD CAUSE. | | | | | | | |
| VIEW worker's name | | | | Telephone: | | | |
| <input type="checkbox"/> While your TANF payment is suspended any support paid to the Division of Child Support Enforcement (DCSE) in the month of suspension for you or your dependents will be mailed to you. You will <u>not</u> receive a TANF Match Payment for any month in which support was mailed to you while your TANF case was suspended. If your case is reinstated, any support paid to the DCSE for you or your dependents will be kept by the state to repay TANF assistance received by your family. | | | | | | | |
| <input type="checkbox"/> If there is someone who is supposed to pay support for you or your dependents, you will continue to receive support enforcement services unless you send written notice that you do not want this service to the Division of Child Support Enforcement. You can obtain their address and telephone number from your local social services agency. | | | | | | | |

| | | | |
|--|-------------------|---------------------|------------|
| <input type="checkbox"/> MEDICAID, FAMIS PLUS OR STATE/LOCAL HOSPITALIZATION (SLH) | | | |
| <input type="checkbox"/> No longer eligible for full Medicaid. Approved for limited Medicaid coverage: Qualified Medicare Beneficiary (QMB) _____ Special Low-Income Medicare Beneficiary (SLMB) _____ Qualified Individual (QI) _____ | | | |
| <input type="checkbox"/> No longer eligible for Medicaid. <input type="checkbox"/> No longer eligible for FAMIS PLUS. <input type="checkbox"/> No longer eligible for SLH. | | | |
| <input type="checkbox"/> No longer eligible for payment of long-term care because of transfer of assets. | | | |
| Effective date | Manual reference: | Eligibility worker: | Telephone: |
| Ineligible family members: | | | |
| Reason for proposed action: | | | |
| <input type="checkbox"/> Income exceeds the full Medicaid limit. If medical or dental expenses of \$ _____ are incurred between _____ and _____ or medical or dental expenses of \$ _____ are incurred between _____ and _____, bring your bills to this agency and your eligibility will be reviewed. | | | |
| <input type="checkbox"/> Other: _____ | | | |

If you disagree with the action we have proposed, you may ask for a conference or appeal the decision. If you appeal this action before _____, the change will not go into effect and your benefits for food stamps, General Relief, or Auxiliary Grant Program may continue until a hearing officer makes a decision. If you appeal before _____ for actions for the TANF, Refugee Assistance, Medicaid, FAMIS PLUS or SLH Program, the assistance may continue. You may have to repay any assistance you get during the appeal process if the hearing decision supports the action we propose. You may appeal the decision proposed in this notice up to 30 days of this notice or by the effective date for TANF, Refugee Assistance, Medicaid, FAMIS PLUS or SLH actions. You may appeals General Relief or Auxiliary Grant Program actions within 30 days of this notice. You may appeal food stamp actions within 90 days of this notice. See the back of this notice for additional information about appeals and fair hearings.

APPEALS AND FAIR HEARINGS

If you do not agree with the action we are proposing or the amount of benefits you are receiving, you may have a hearing on your case. You will have a chance to explain why you think we made a mistake at the hearing and a hearing officer will decide if you are right. A hearing gives you a chance to review the way a local social services agency handled your situation about your need for TANF or food stamps. The hearing is a private, informal meeting at the local social services agency with you and anyone you want to bring as a witness or to help you tell your story, such as a lawyer. A representative of the local agency will be present as well as a hearings officer. The hearing officer is the official representative of the State Department of Social Services or the Department of Medical Assistance Services (DMAS).

It is YOUR RIGHT TO APPEAL decisions of the local social services agency. If you want more information or help with an appeal, you may contact the local social services agency. It will not cost you anything to request a fair hearing, and you will not be penalized for asking for a fair hearing. If you want free legal advice, you may contact your local legal aid office.

How to File an Appeal

- Send a written request for **Medicaid, FAMIS PLUS, or SLH** appeals to Client Appeal Division, Department of Medical Assistance Services, 600 East Broad Street, Richmond, Virginia 23219.
- Send a written request for **financial assistance and food stamps** appeals to the Virginia Department of Social Services, Attention: Hearing and Legal Services Manager, 7 North Eighth Street, Richmond, Virginia 23219-3301 or call me at the number listed on the front, or call 1-800-552-3431

Local Agency Conference

In addition to filing an appeal, you may have a conference with your local social services agency. During the conference, the agency must explain its proposed action. You will have the chance to present any information where you disagree with the agency's proposed action. You may present your story by an authorized representative, such as a friend, relative, or lawyer.

If you request the conference within 10 days of receiving of your notice to decrease or end your TANF or food stamps benefits, the proposed action will not take place until after there is a decision made for the conference.

If the conference does not satisfy you and you want to continue to receive your benefits until there is a hearing decision, you must file an appeal for financial assistance benefits within two days following the date of the conference and within 10 days of the conference date for food stamps. If you do not ask for a conference but you file an appeal within 10 days of the notice of action to reduce, suspend, or terminate your TANF or food stamps, you may continue to receive benefits until there is a hearing decision. If you appeal the proposed action on your TANF case before the reduction, suspension or termination effective date, you may also receive continued coverage. Note that you may have to repay benefits you receive during the appeal process if the hearing decision supports the agency action.

Hearing Process and Decision

The hearing officer will notify you of the date and time for your hearing at the local social services agency or at a location agreeable to you and the agency. If you cannot be there on that day, call the hearing officer and your eligibility worker immediately. If you need transportation, the local agency will provide it.

At the hearing, you and/or your representative will have the opportunity to:

- Examine all documents and records used at the hearing;
- Present your case or have it presented by a lawyer or by another authorized representative;
- Bring witnesses;
- Establish pertinent facts and advance arguments; and
- Question or refute any testimony or evidence, including the opportunity to confront and cross-examine witnesses.

The hearings officer will base the decision only on the evidence and other material introduced at the hearing, except when medical information is requested or other essential information is needed. In this event, you and the local social services agency would have the opportunity to question or refute this additional information.

You will get the hearings officer's decision in writing on your appeal within 60 days of the date the State Department of Social Services receives your appeal request. You will get the hearings officer's decision within 90 days of the date the Department of Medical Assistance Services receives your appeal request for Medicaid, FAMIS PLUS, or SLH appeals.

HIPAA PORTABILITY RIGHTS

Under a federal law known as HIPAA, you may need evidence of your coverage to reduce a preexisting condition exclusion period under another plan, to help you get special enrollment in another plan, or to get certain types of individual health coverage even if you have health problems. You may request a "Certificate of Creditable Coverage" for your coverage by visiting the DMAS website at www.dmas.virginia.gov or contacting the Helpline at 804-786-6145.